

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Island Promise ARCH, L.L.C.	CHAPTER 100.1
Address: 1336 Uila Street, Honolulu, Hawaii, 96818	Inspection Date: October 29, 2019 Annual

THIS PAGE MUST BE SUBMITTED WITH YOUR PLAN OF CORRECTION. IF IT IS NOT, YOUR PLAN OF CORRECTION WILL BE RETURNED TO YOU, UNREVIEWED.

YOUR PLAN OF CORRECTION MUST BE SUBMITTED WITHIN TEN (10) WORKING DAYS. IF IT IS NOT RECEIVED WITHIN TEN (10) DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.

Auth Felipe
12/15/2019
Island Promise ARCH

Island Promise ARCH
1336 Uila St, Honolulu, Hawaii 96818

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance.</p> <p>FINDINGS SCG #3- No evidence of annual TB clearance.</p>	<p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>Please see attached</i></p>	<p><i>Antw Felipe</i> <i>12/15/2019</i></p>

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Island Promise ARCH

1336 Uila St, Honolulu Hawaii 96818

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p><u>FINDINGS</u> Resident #2- Medication order of Januvia 100 mg every day changed to Januvia 50 mg every day on 9/20/19. Medication label does not reflect change, label reads "Januvia 100 mg every day".</p>	<p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Please see attached</p>	<p>Anita Felipe 12/15/2019</p>

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Island Promise ARCH

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (f) Medications made available to residents shall be recorded on a flowsheet. The flowsheet shall contain the resident's name, name of the medication, frequency, time, date and by whom the medication was made available to the resident.</p> <p><u>FINDINGS</u> Resident #2- Medication order of Januvia 100 mg every day changed to Januvia 50 mg every day on 9/20/19. September 2019 administration record does not reflect dose change.</p>	<p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Please see attached</p>	<p>Ant Felix 12/15/2019</p>

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Licensee's/Administrator's Signature: Anita Felipe
Print Name: Anita Felipe
Date: 12/15/2019

Licensee's/Administrator's Signature: Anita Felipe Rep
Print Name: Anita Felipe
Date: ^{or} 11/12/2019

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Island Promise ARCH
1336 Ulla St., Honolulu Hawaii 96818
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CHO: Anita Felipe, RN, CHO
Cell: 808-428-0990

STATEMENT OF DEFICIENCIES AND PLAN OF CARE

Date of inspection: October 29, 2019

11-100.1-9 Personnel, staffing and family requirements (b)

Part 1. SCG had his skin test on 11/1/2019 in Lanakila Health Center, his result was negative.

Part 2. A checklist was created by the CHO so that all personnel of the home are checked off for all the requirements needed to update annually. PE, TB clearance are required by DOH to be updated annually. The certificate of TB clearance was issued and a copy was inputted in the CHO records.

11-100.1-15 Medications (a)

Part 1. Resident's MAR was changed by discontinuing the medicine Januvia 100 mg to 50 mg. Since the resident has a lot of the Januvia 100 mg, the CHO bought a medicine cutter to cut the medicine to two 50 mg. The CHO put a note on the resident's Januvia prepacked medicine to check the MAR for new dosage.

Part 2. If there's a new PCP order to decrease the medicine's dosage, CHO will write a note on the medicine container to check the MAR for the new dosage. CHO will always check every day and compare the MAR and physician order to make sure that any new order will be reflected on the MAR. CHO will also make sure that there's a post-it note on the MAR about any change of dosage so that the other caregivers are aware. A medicine cutter will also be available to use if the medicine on stock has a higher dose than the new order and it's possible to cut and divide the medicine to deliver the new dose. The CHO will provide an endorsement notebook that is accessible to all caregivers so that everybody is aware of the any changes of any resident's medications or treatments.

Anita Felipe
12/20/2019
Island Promise ARCH

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CHO: Anita Felipe, RN, BSN

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(continuation)

11-100.1-15 Medications (F)

Part 1) The residents MAR was changed to reflect the new medications ordered. The previous dosage was marked discontinued and yellowed out.

Part B) The CHO should not remove any MAR that was mistakenly ruined by liquid spill it should be kept in the MAR folder so that the CHO will prevent an error when re printing the MAR. CHO has to double checked if the discontinued medicines are correctly marked discontinued on the date it was ordered and new dosage are accurately written on the MAR showing the date or time of starting the new dosage. CHO will put a post it or any reminder note to check the physician's new orders when creating new MAR when changing ruined MAR. CHO has created an endorsement notebook to alert all caregivers about new orders. CHO will always compare and triple check the physician's order form and the MAR when creating new MAR which indicates the date when the new order was made every month when creating the new monthly MAR.

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